(c) The details are enclosed as Statement-ll.

Statement-I

Government and Private Spending on Healthcare

	2000	2001	2002
Government expenditure on Health (%)	20.9	20.7	21.3
Private expenditure on Health (%)	79.1	79.3	78.7

Source: World Health Report 2005

Statement-ll

Public Health Spending as % of GDP

India	China	U.K.	Pakistan	Thailand	Sri Lanka	Bangladesh
0.9	2.0	6.2	1.0	2.1	1.8	1.6

Source: Human Development Report 2004

Delhi High Court's directions on medical reimbursement

660. SHRI BASHISTHANARAIN SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether full amount is reimbursed to Government employees for money spent by them on treatment at State run hospitals and those empanelled for specialized treatment;

(b) if so, the details thereof and if not, the reasons therefor;

(c) whether Government are aware of the judgment of the High Court of Delhi [WP(C) 5015 of 2003] ruling that full reimbursement be made of the money spent by the patient;

(d) if so, the response of Government thereto; and

(e) the action Government propose to take to implement orders of the Hon'ble High Court?

THE MINISTER OF STATE JNJTHE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATfPKNABAKALAKSHMI): (a) and (b) Under CGHS expenditure incurred in Government hospitals is reimbursable as per actual expenditure except the items for, which there is prescribed ceiling rate and for items like diet, telephone etc. Private hospital recognised under CGHS are not permitted to^charge more than CGHS approved rates and hence it amounts to full reimbursement.

(c) to (e) Yes, Sir. The W.P. No. 5015/2003 was filed by an individual Shri J.K. Saxena, an employees of Government of NCT of Delhi versus Government of NCT of Delhi claiming full reimbursement of expenditure incurred on treatment at National Heart Institute for open heart surgery. The Hon'ble High Court of Delhi in its Order dated 16.12.2004 has directed the NCT of Delhi to reimburse full amount to the petitioner. Action on this order is required to be taken by the Govt, of NCT, Delhi.

Rural Health Care Programmes

661. SHRI DWIJENDRA NATH SHARMAH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the Centrally Sponsored Schemes and programmes for development and promotion of health in the rural areas of the country;

(b) the details of funds allocated to each State for these schemes during the last three years; and

(c) the details of achievements made by Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKALAKSHMI): (a) The National Rural Health Mission (NRHM) was launched in April 2005 in the country with special focus on 18 States with poor health indicators to provide for accessible, affordable & equitable health-care to all the citizens. Under the overall umbrella of NRHM, a number of important Centrally Sponsored Schemes like the Reproductive and Child Health (RCH) Programme Phase-ll, Janani Suraksha Yojana (JSY) besides the ongoing Immunization & disease control programmes are being implemented by the States.

(b) The details of funds allocated State-wise for Health and Family Welfare Schemes is given in the enclosed Statement I and II. (See below)